

CLAIMS ONLY

Application Number

" Filing Date

101696440

Applicant(s)

~~May be used for additional claims or amendments~~

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
1						
2						
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50						
Total Indep.	2					
Total Depend.	15					
Total Claims	17					

May be used for additional claims or amendments

	Indep.	Depend.	Indep.	Depend.	Indep.	Depe
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Total Indep.						
Total Depend.						
Total Claims						